Name in Full

Certificate of Death

Basil Baucum

Died at Town Hayward County St Marys MARYLAND

Date 19 24 Month Jan 31 Day | Age Y. 73 M. D. | Native of Md | Occupation Farmer

Male ~~Female~~ | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ Number of children living 8

Husband of
Wife

Father's Name Gilt Baucum

Mother's Maiden Name X

Cause of Death: Primary Dropsy

Immediate Heart Trouble

How long sick 4 days

Accident, Suicide, Homicide

Reported by Dr Cole

Address Abbeville Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 28328

Name In Full

Certificate of Death

William Dixon

Town: Queen Tree

County: St. Mary's

Died at Queen Tree St. Mary's MARYLAND

Date 1904 Month Day: Mar. 7

Age: Y. 81 M. D.

Native of: St. Mary's Co.

Occupation: Farmer

Male ~~Female~~

White ~~Colored~~

Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living 2

Husband ~~Wife~~ of Mary E. Thompson

Father's Name: Thomas Dixon

Mother's Maiden Name: Susan Brown

Cause of Death — Primary: La Grippe

Immediate: Exhaustion

How long sick: 5 weeks

~~Accident, Suicide, Homicide~~

Reported by Zach. R. Morgan

Address Mechanicsville Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78888

Name in Full

Certificate of Death

Maria R. Gardiner

Town

County

Died at Harrow Hills St. Mary's MARYLAND

Month	Day	Y.	M.	D.	Native of	Occupation
March	23	73			Maryland	Housewife

Date 1904

~~Male~~ White ~~Married~~ Widow ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living none

~~Husband~~ of

Wife

Father's Name William Gwynn

Mother's Maiden Name Don't Know

Cause of Death: Primary Cancer of oesophagus

Immediate Starvation

How long sick: Two weeks

~~Accident, Suicide, Homicide~~

Reported by Zach. R. Morgan, M. D.

Address Mechanicsville Maryland.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70999

Name in Full

Certificate of Death

James Harris

Died at Oakland (Town) St. Marys (County) MARYLAND

Date 1904. Month March Day 11. | Age Y. 29 M. — D. — | Native of St. Marys Co, | Occupation Farmer

Male ~~Female~~ | White ~~Colored~~ | ~~Married~~ Single ~~Widow~~ Widower ~~Divorced~~ | ~~Number of children living~~

~~Husband~~ Wife of

Father's Name John Harris | Mother's Maiden Name Miss Thompson

Cause of Death: Primary — Congestive Chill, | How long sick 24 hours

Immediate | ~~Accident, Suicide, Homicide~~

Reported by T. Thorpe Lynch M.D.

Address Valley Lee, St. Mary's Co. Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78000

Nama in Full

Certificate of Death

E. S. Jones

Town

Died at Hilleary md

County

St Mary's

MARYLAND

Month Day Y. M. D.

Native of

Occupation

Date 1907 3 15 Age 72 md Farmer

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 2

Husband of

Wife

Father's Name

Mother's Name

Cause of Death { Primary Liver Kidney and Heart — How long sick 3 mos

Immediate Heart

~~Accident~~ ~~Suicide~~ ~~Homicide~~

Reported by J. W. Riley.

Address Oakville Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU

Name in Full

Certificate of Death

Thomas Oscar Mattingly

Died at Town: Palmers County: St. Mary's MARYLAND

Date 1904 Month: 3 Day: 27 | Age Y.: 51 M.: 1 D.: 9 | Native of: Md | Occupation: Clerk

Male / ~~Female~~ | White / ~~Colored~~ | Married / ~~Single~~ | ~~Widow~~ / ~~Widower~~ | Divorced | Number of children living 8

Husband of / ~~Wife~~ Lizzie Guldenbrough

Father's Name Wm. Mattingly | Mother's Maiden Name Maria Tony

Cause of Death: Primary Pulmonary Tuberculosis | How long sick 6 days

Immediate | Accident, Suicide, Homicide

Reported by Rob't L. Wilson

Address Palmers Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU 70558

Name in Full

Certificate of Death

James F. Smith

Died at (Town) This home (County) St. Mary's MARYLAND

Date 1904	Month Day	Age Y. M. D.	Native of	Occupation
	Mar. 23	32	Md.	Laborer

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widowed~~ Widower ~~Divorced~~ ~~Number of children living~~

Husband of
Wife

Father's Name Don't Know

Mother's Maiden Name Mary Smith

Cause of Death: Primary — died suddenly. Don't

Immediate — Know cause

How long sick

~~Accident, Suicide, Homicide~~

Reported by Sylvester Adams, Undertaker

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79909

Name in Full

Certificate of Death

Farmer Thomas

Town

County

Died at

MARYLAND

Date 19 04 | Month 3 Day 4 | Age Y. 25 M. — D. — | Native of | Occupation

~~Male~~ Female | ~~White~~ Colored | ~~Married~~ Single | ~~Widow~~ Widower | Divorced | Number of children living

Husband of
Wife

Father's Name James F. Farmer | Mother's Maiden Name Hattie Parker

Cause of Death: Primary — Tuberculosis of Lungs | How long sick 6 mos.

Immediate — Aortic Regurgitation | Accident, Suicide, Homicide

Reported by Wm. V. Palmer

Address Palmer Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79808